

Work Order ID 94510

December-19-12 11:33:52 AM

94510

Page 1

Item ID: D3884-1

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Saddle, Inboard LH

Stop

NS2

Start Date: 12/13/12 Start Qty: 4.00

4

Cust Item ID:

Required Date: 1/18/13 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals: Process Plan: ML5Date: 12-12-20 Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
100		0.00							
100	HAAS CNC VERTICAL MACHINING #1								
HAAS 1		0.00							
HAAS CNC vertical machine #1	Memo	Program Batch No. <u>9H510</u>							
		Double check by: <u>AA</u>							
		1-Machine Step No 1 per Folio FA818 and inspect per attached Dimension Sheets							
		2-Machine Step No 2 per Folio FA818 and inspect per attached Dimension Sheets							
		3-Machine Step No 3 per Folio FA818 and inspect per Dimension Sheets							
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
110	Memo	0.00							
QC									
Quality Control									

13-04-21 4 013-04-21 4 0

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									
FAULT CATEGORY									
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions					
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other					

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Page 2

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Required Date: 1/18/13 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

QC8- Inspect parts - second check

0.00

12/13/04/22

4 0

120

QC

Quality Control

130

Chemical Conversion Coat per QSI005 4.1

0.00

4 12/13 4-23

130

HandFinish

Hand Finishing

Memo

0.00

140

White Gloss(Ref:4.3.5.1) per QSI005 4.3-Alum

0.00

4X4 my 13/04/24

140

Powdercoat

Powder Coating

Memo

3:30 0.00
START TIME:
OVEN TEMPERATURE: 325°
FINISH TIME: 4:00

W125069

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Date:

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	Bend	Grain	Ovalized	Pressure/Forced							
Centre Not Concentric to O/S	BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure							
Cracks	Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld							
Crushed/Crimped.	Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled							
Cuffs	Contamination	Maintenance	Part Moved								
Heat Treat	Countersink	Mislabeled	Positioned Wrong								
Inspection Strip in Tube	Cut Too Short	Misread	Power Loss/Surge								
Ripples in Bend	Drill Holes	Offset									
Torque Waves in Extrusion	Drawing	Out of Calibration									
Turning Sequence	Finish	Out of Sequence									
Wave/Twist in Tube	Folio	Outside Dimensions									

Work Order ID 94510

December-19-12 11:33:52 AM

94510

Page 3

Item ID: D3884-1

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Revision ID:

Item Name: Saddle, Inboard LH

Stop

NS2

Start Date: 12/13/12 **Start Qty:** 4.00

4

Cust Item ID:

Required Date: 1/18/13 **Req'd Qty:** 4.00

4

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run

Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2

**Sequence ID/
Work Center ID**

**Operation
Description**

**Set Up/
Run Hours**

Tool ID

Tool #

**Plan
Code**

**Accept
Qty**

**Reject
Qty**

**Reject
Number**

**Insp.
Stamp**

150

150

QC

Quality Control

QC3- Inspect Part Finish

0.00

H φ 13-4-25

160

160

Packaging

Packaging

Identify as per dwg & Stock Location: _____

0.00

Memo

840?

0.00

13/3/29 CE

170

170

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

13/5/348

MF
13-4-29

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS								
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <hr/> <hr/> <hr/>			
										<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <hr/>			
										<input type="checkbox"/> Other			

Picklist Print

December-19-12 11:33:52 AM

Page 1

Work Order ID: 94510

Parent Item: D3884-1

Parent Item Name: Saddle, Inboard LH

Start Date: 12/13/12

Required Date: 1/18/13

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP RevA: New issue DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D6101-017 Saddle Billet		Manufactured	No				Each	10.0000		4			

Location	Loc Qty	Loc Code
MAT041	10	
93314	10	

B 94695 X 4

on 13/04/18

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION			AGAINST DEPARTMENT/PROCESS						
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
										<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

DART AEROSPACE LTD				Work Order:	94510
Description: Saddle, Inboard, LH				Part Number:	D3884-1
Inspection Dwg: D3884 Rev. B				Page 1 of 1	

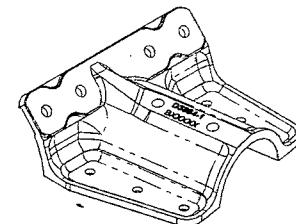
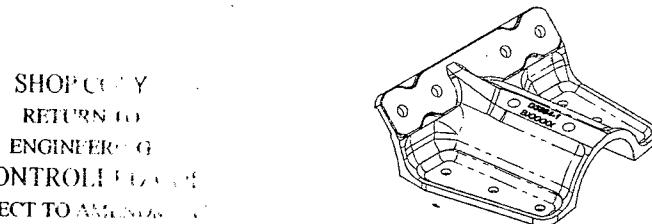
Inspect dimensions highlighted on inspection sheet drawing and record below:

Dim	Min	Max	Go/No Go Gauge	Recorded Actual Dimensions				By	Date
				1	2	3	4		
A	2.870	2.880		2.874	2.874	2.874	2.874		
B	1.433	1.443		1.436	1.436	1.436	1.436		
C	0.638	0.658		.6495	.6495	.6485	.6475		
D	3.895	3.905		3.897	3.897	3.897	3.897		
E	0.257	0.262		.258	.258	.258	.258		
F	0.605	0.625		.6145	.6145	.6155	.6155		
G	1.120	1.130		1.124	1.122	1.124	1.124		
H	2.245	2.255		2.248	2.249	2.248	2.248		
I	2.000	2.020		2.0005	2.003	2.003	2.001		
J	0.140	0.175		.141	.141	.141	.142		
K	1.265	1.285		1.2658	1.2664	1.2666	1.2658		
L	0.115	0.135		.124	.124	.123	.123		
M	0.240	0.260		.248	.248	.248	.248		
N	0.110	0.140		.135	.135	.135	.135		
O	0.240	0.260		.253	.248	.249	.248		
P	2.826	2.886		2.865	2.865	2.865	2.865		
Q	0.178	0.198		.188	.188	.188	.188		
R	0.140	0.165		.141	.141	.140	.140		
S	0.720	0.780		.765	.765	.765	.765		
T	1.220	1.280		1.265	1.265	1.265	1.265		
U	1.245	1.255		1.2485	1.248	1.248	1.248		
V	5.990	6.010		6.001	6.001	6.001	6.001		
W	2.495	2.505		2.500	2.498	2.499	2.499		
X	0.490	0.510		.496	.497	.496	.497		
Y	0.020	0.040		.035	.035	.035	.035		
Z	0.313	0.318		.314	.314	.314	.314		
AA	0.760	0.765		.760	.760	.760	.760		
AB	0.215	0.220		.220	.217	.217	.216		
AC	0.316	0.321		.316	.316	.316	.316		
AD	1.745	1.755		1.748	1.749	1.748	1.748		
AE	0.990	1.010		1.002	1.0015	1.000	1.000		
AF									

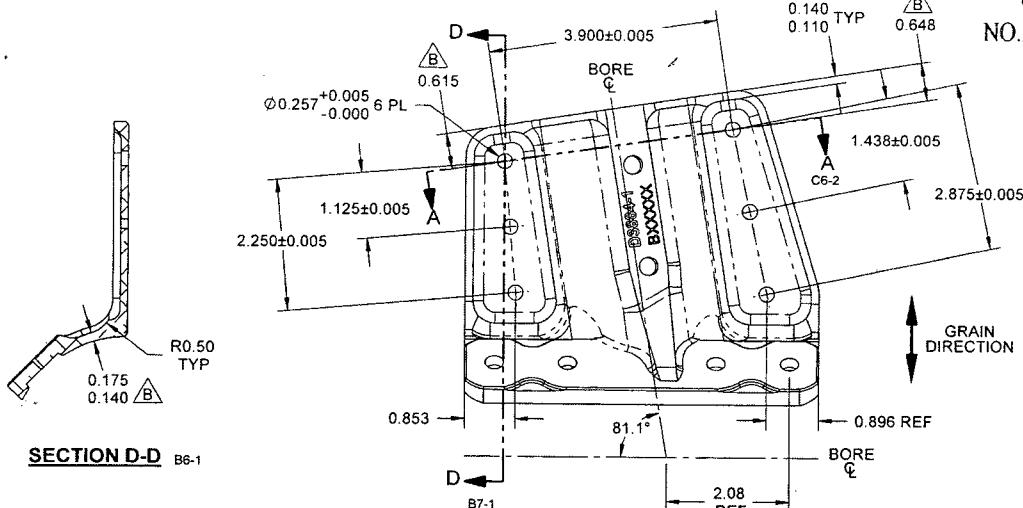
Accept/Reject

Measured by:	<i>SL</i>	Audited by:	<i>CMF</i>
Date:	13-04-21	Date:	13/04/22

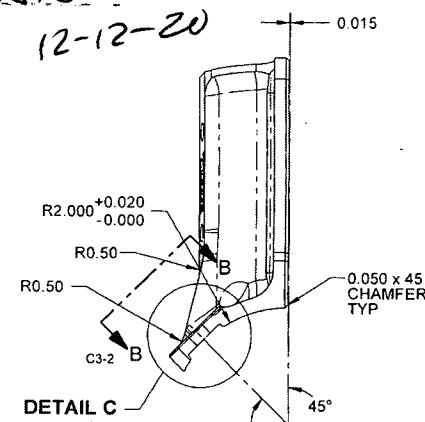
Rev	Date	Change	Revised by	Approved
A	09.10.22	New Issue	KJ	<i>SL</i>



12-12-20



SECTION D-D B6-1



DETAIL C
B2-2

D3884-1 SADDLE, INBOARD LH (SHOWN)
D3884-2 SADDLE, INBOARD RH (OPPOSITE)

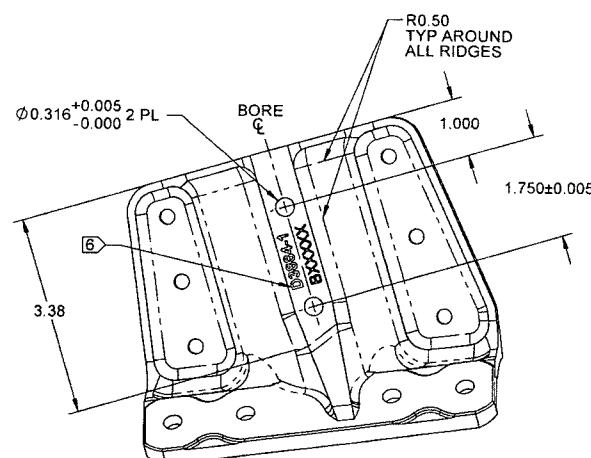
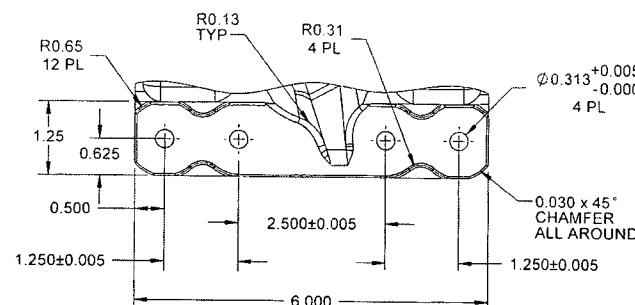
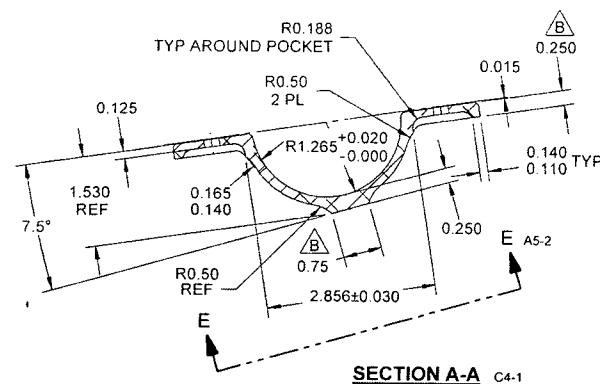
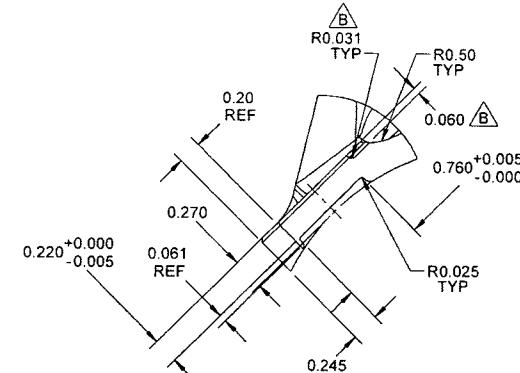
NOTES:

- 1) MATERIAL: 7075-T7351 ALUMINUM PER QQ-A-250/12 OR AMS-QQ-A-250/12 OR AMS-QQ-A-250/12 (REF DART SPEC. D6101-017)
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
POWDER COAT "WHITE" (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: ENGRAVE PART AND BATCH NUMBER IN THIS AREA TO MAX. DEPTH OF 0.010 WITH A MIN. TOOL RAD OF R0.010
- 7) WEIGHT: 0.71 lbs

B	D6101-017 WAS D6102-017, ZN A6-1: ADD NOTE, ZN C4-2: ADD R0.031. ZN C2-2; INCREASED TOLERANCE 0.175 WAS 0.165. ZN B7-1; ADD 0.615. ZN C6-1, ADD 0.648. ZN C4-1; ADD 0.250. ZN D6-2; ADD 0.060. ZN C2-2; 0.75 WAS 0.65. ZN D7-2		RF	09.06.30
A	NEW ISSUE		RF	09.03.30
REV.	DESCRIPTION		BY	DATE
DESIGN	RF	DART AEROSPACE USA, INC. PORT HADLOCK, WA		
DRAWN	RF	DRAWING NO. D3884		
CHECKED	RH	REV. B SHEET 1 OF 2		
MFG. APPR.	<i>[Signature]</i>	TITLE INBOARD SADDLE		
APPROVED	<i>[Signature]</i>	SCALE NTS		
DE APPR.	<i>[Signature]</i>	DATE 09.06.30		

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94570

VIEW B-B B3-1
(ROTATED FOR CLARITY)DETAIL C C6-2
SCALE 2XRELEASED
09/07/15 M

DESIGN	RF	DART AEROSPACE USA, INC.
DRAWN	RF	PORT HADLOCK, WA
CHECKED	<i>PS</i>	DRAWING NO.
MFG. APPR.	<i>JW</i>	D3884
APPROVED	<i>MM</i>	REV. B
DE APPR.	<i>MM</i>	SHEET 2 OF 2
DATE	09.06.30	TITLE
		INBOARD SADDLE
		NTS

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